

SMYRNA BULLDOGS



2010 FOOTBALL and CHEERLEADING REGISTRATION FORM

FOOTBALL

CHEERLEADING

CHILDS NAME: _____ DATE OF BIRTH: _____ AGE ON JULY 31, 2010 _____

STREET ADDRESS: _____ CITY: _____ ZIP: _____

[] MALE [] FEMALE HOME PHONE: () _____ CELL. PHONE: () _____ OTHER PHONE: () _____

E-MAIL ADDRESS: *i.e. benjido@aol.com* _____

SCHOOL FOR FALL, 2010 _____ GRADE: _____

YRS OF EXPERIENCE _____ WHAT TEAM/COACH DID YOU PLAY ON LAST YEAR? _____

As a player/cheerleader in the Smyrna Bulldogs Youth Football and Cheerleading program, I will always play with good sportsmanship and conduct and act to the best of my ability. I will make every effort to attend all games and practices, maintain passing grades in schoolwork and obey my parents, teachers and coaches.

SIGNATURE _____ Date _____
SIGNATURE OF PLAYER OR CHEERLEADER

LIVES WITH [] FATHER [] MOTHER [] BOTH IT IS NECESSARY TO FILL IN THE INFORMATION FOR THE PARENT THE CHILD DOES NOT LIVE WITH

FATHER: _____ MOTHER: _____

ADDRESS: _____ ADDRESS: _____

CITY, STATE, ZIP _____ CITY, STATE, ZIP _____

HOME PHONE: _____ HOME PHONE: _____

MEDICATIONS CURRENTLY BEING TAKEN BY PLAYER/CHEERLEADER: _____

LIST ANY MENTAL OR PHYSICAL CONDITIONS OR ALLERGIES THAT WILL BE OF IMPORTANCE TO THE COACHES _____

PARENTAL AUTHORIZATION & INDEMNIFICATION

The undersigned parent and/or guardian of the above-named minor, hereby consents to the full participation by the above-named minor in the Tennessee Youth Football Alliance (TYFA) and agree for said minor to be assigned by TYFA or TYFA agents a TYFA team.

I acknowledge that the activities that my child will be involved in may be dangerous in nature and I represent that I know and understand those dangers to which my child will be exposed. I specifically acknowledge and understand that football/cheerleading is a sport with risk of serious injury or even death.

I do hereby voluntarily assume on behalf of the above-named minor each, every, and all risks and/or hazards to which said minor or myself might be exposed during TYFA activities including, but not limited to, playing said sport, cheerleading and/or transportation to and from all activities and medical attention of any nature resulting from injuries sustained in the activities.

I do hereby WAIVE, RELEASE, ABSOLVE AND AGREE TO INDEMNIFY PAY AND HOLD SAFE AND HARMLESS said football/cheerleading program, it's entire organization, TYFA, the local league/community, their coaches, participants, Board of Directors, all officers, all assistants, persons and/or organizations that transport the participants for any purpose for and from all claims, injuries, damages of both a compensatory and punitive nature and for any and all other claims and/or damages which might arise out of and/or due to the above-named minor's participation in said activities.

The parent/guardian whose signature appears below does hereby consent to any and all medical treatments including anesthesia and operations which may be deemed necessary by medical care providers attending to the above-named minor for injuries sustained in the activities.

I further agree and acknowledge that I am responsible for all charges incurred in connection with treatment and care rendered to the above-named minor pursuant to this agreement.

In signing this form, I also give this organization, as well as TYFA, permission to use my child's photograph as a participant on either website.

I ACKNOWLEDGE THAT I HAVE FULLY READ THIS COVENANT AND AGREE AND CONSENT TO THESE TERMS AND CONDITIONS

PARENT'S SIGNATURE _____ DATE _____

ADMINISTRATIVE USE ONLY

DATE OF REGISTRATION _____

CODE OF CONDUCT [] YES [] NO BIRTH CERT [] YES [] NO TOTAL PAID \$ _____

METHOD OF PAYMENT [] CK. [] Cash [] Other _____ RCPT NBR: _____ AMT. DUE \$ _____